LAW OFFICES SHOOK, HARDY, OTTMAN, MITCHELL & BACON SUNSVA DHARD BIE KANSAS CITY, MISSOURI 64106 TELEPHONE BALTIMORE 1-3611 AREA CODE 816 May 19, 1967 Alexander Holtzman, Esq. Conboy, Hewitt, O'Brien & Boardman 20 Exchange Place New York, N. Y. 10005 Dear Alex: Here are my ideas on Dr. Selye in outline form. I am sending a copy to Frank with the hope the two of you will be able to talk Monday before you call Dr. Selye. I would appreciate receiving the outline back by Wednesday, together with any modification needed, so Dave may take it with him.

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William W. Shinn

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Enclosure

cc: Francis K. Decker, Esq.

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SUBMISSION

- I. Disease as a failure to adapt successfully.
 - A. General adaption syndrome: Alarm reaction stage of resistance stage of exhaustion (stressor situation causes stress which is resistance to "threat" if stress continues unabated may lead to death).
 - B. Avoidance of stress by deviation a diversion of energy so as to avert its becoming a destructive process.
 - C. Example: A coronary prone person must learn to avoid stressor situations because of his poor ability to adapt he may avoid stress buildup by many routes including smoking.
 - D. Conclusion: Even if it is assumed or postulated that smoking may have some direct relationship with certain diseases in certain predisposed persons on balance many of such persons should continue to smoke. Corollaries:
 - (1) Smoking may avert mental breakdown.
 - (2) Smoking may avert physical breakdown.
 - (3) "Many" doctors will agree to a theory of "benefits on balance" who will not agree the case against cigarettes is unproved.

- (4) Fright techniques to discourage smoking may do more harm than good.
- (5) The "stress" theory explains scientifically why smoking clinics fail and why cigarette smoking is so widely practiced. It "fits" most people's concept of why they smoke: to "relax", to get a "pickup" to "have something to do".
- (6) Establishing "social utility" for smoking makes unscientific labeling and legislation to discourage smoking less justifiable, particularly on a "it can't do any harm to interfere with smoking" rationale.
- Description of adjusting to a stressful life by seeking diversions which help key one up or down so as to better keep pace with one's genetically established pace of life would be established as a general proposition.

 Smoking would not be singled out although the industry could openly show interest and provide financial support. The theory should be promulgated through articles, books, TV appearances, etc.

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Specifically: Dr. S. would accept grants to study the affects of stress on animals, would speak and assist writers, would consult regarding ways to interest medical schools and doctors, etc. If such a program properly publicized his theories, he would testify before Congress. He would not give an opinion on smoking as a cause of any disease because he does not consider himself qualified. [His private opinion is that smoking does cause some cancers to develop, may cause heart disease in some people and does cause bronchitis - he says these views are shared by all the doctors he knows but that these same doctors are willing to concede a beneficial diverting affect to smoking.] Dr. S. says that experimentation work to date on smoking is pretty "useless", particularly that involving the lungs of animals there are too many "differences" in this area between man and animals.

IV. Procedure

- A. Is the industry interested? The ultimate cost might be substantial although initial steps would not be.
- B. Dr. S meets with Dr. H.
 - C. Dr. S. talks with a science writer to see what can be done to publicize the theory.

- D. Dr. S. sets up some meetings with doctors.
- E. TV appearances medical school lectures special fellowships and grants to pursue theory congressional appearance.
- F. Creation of image of smoking as "right" for many

 people as a "natural" act for man as a scientifically approved "diversion" to avoid disease causing stress.
- G. Possible program on smoking and stress followed by a book.